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JAN 25 2006

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PATENT FACSIMILE NUMBER:

*732-878-7660* 

To - USPTO Re:		' Fax Number	Phone Number		
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Applicants: Du-Thumm et al.		Examiner: F. Krass			
Serial No.: 10/618,331		Art Unit: 1614			
Filing Date: July 11, 2003		Confirmation No.: 5282			
For: Chewable Antiplaque Co	nfectionary Dental	Attorney Docket No.: 7050-00			
Composition	·				
Date	·				
January 25, 2006		P 7 4 22			
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# **Enclosed:**

1 page - Supplemental IDS1 page - Form PTO-1449

13 pages - Translation of ES 2 131 006

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JAN 25 2006

### In The United States Patent and Trademark Office

Applicants: Du-Thumm et al.

Serial No.: 10/618,331

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Dental Composition

Examiner: F. Krass

Art Unit: 1614

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## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

The applicants hereby submit a Supplemental Information Disclosure Statement pursuant to 37 C.F.R. § 1.97 to 1.98 for the Examiner's consideration. Attached is a Form PTO-1449 listing a Spanish Patent Application Publication. This Publication was cited by the Examiner in a prior Office Action, but no English language translation was provided. Applicants hereby submit a copy of the English language translation of ES 2 131 006.

As this IDS is filed after the mailing of a first Office Action, it is believed that a fee of \$180.00 is due. However, in the event that additional fees are due, the Commissioner is hereby authorized to charge any fees that may be necessary to Deposit Account No. 03-2455.

Respectfully submitted,

Du-Thumm et al.

Date: January 25, 2006

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FORM PTO-1449 U.S. DEPARTMENT OF COMMERCE		ATTORNEY DOCKET NO.							
PATENT AND TRADEMARK OFFICE  INFORMATION DISCLOSURE STATEMENT (Use several sheets if necessary)		7050-00	10/618,331						
			Du-Thumm et al.						
		al sheets if necessary)	FILING DATE ART UNIT CONFIRMATION 7/11/2003 1614			5282			
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EXAMINER INITIAL		DOCUMENT NUMBER	COUNTRY	NAM	E	DATE	TRANSLATION		
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EXAMINER INITIAL		DOCUMENT INFORMATION							
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.